

Active Child and Adolescent Mental Health Case Management Overview

Purpose of Child and Adolescent Mental Health Case Management:

The purpose of Child and Adolescent Mental Health Case Management is to assist youth ages 4 to 17 in gaining access to needed medical, social, educational and mental health services. Community based services should be exhausted prior to seeking a higher level of care (psychiatric residential treatment or group home). The case manager may assist in seeking funding through the Family Assessment and Planning Team (FAPT) if the youth's insurance does not cover the needed mental health therapeutic service. The case manager cannot guarantee that FAPT will approve the service request.

Active Case Management Services Requirements:

- There is a fee of **\$326.50** per month for Child and Adolescent Case Management (C&A CM) services. Private insurance companies do not reimburse C&A CM services. Only Medicaid reimburses case management services. If the child does not have Medicaid, then the parent is responsible for paying for the services. The fee may be reduced based on the parents/guardian's ability to pay (income and family size), and it is suggested you complete the financial agreement with a Reimbursement Specialist to see if you qualify for the reduced fee.
- Even if the youth's insurance covers the cost of case management services, it is important to complete the liability form to know the cost of the service based on the sliding scale in the event that there is a lapse in the insurance coverage. The full monthly cost for case management services is **\$326.50**.
- If the youth's insurance does not cover case management services, the case manager could request Targeted Case Management, along with another therapeutic service, at FAPT. Until FAPT approves funding for Targeted Case Management, the guardian would be responsible for paying the established monthly cost for case management through CIBH. After FAPT approves funding for Targeted Case Management, the guardian would only be responsible for paying the established parental co-pay as determined in the FAPT application.
- The case manager will meet with the guardian and the youth to complete the Child and Adolescent Case Management Comprehensive Needs Assessment within 30 days of the intake assessment.
- The case manager **will schedule an Individual Service Plan (ISP) meeting approximately one week after the C&A CM assessment** appointment to develop the ISP with the guardian and youth. The case manager will use the information gathered during the assessment to develop the Individual Service Plan (ISP), which states the treatment needs, goals, objectives, interventions and discharge plan.
- The **case manager must meet with the youth and the guardian at least every 90 days** to review the progress towards the goals, re-assess needs and learn of the satisfaction of services. During this quarterly review, the case manager will also complete the Daily

Living Activities (DLA20) assessment with the youth and guardian. If new needs are discovered, the case manager will update the Individual Service Plan (ISP) with the youth and guardian.

- The case manager will contact the guardian at least once a month to discuss progress, needs and services.
- The case manager must link, coordinate and/or monitor services monthly through contact with the guardian, the youth, and/or treatment providers.
- If the youth requires active case management services for more than a year, the case manager will meet with the guardian and youth to complete a re-assessment, develop a new ISP, update release of information forms and annual documentation as required per regulations.

Overview of the Process for Seeking Funding for Services from the Family Assessment and Planning Team (FAPT)

The client has to have a stakeholder for the Family Assessment and Planning Team (FAPT) to hear the case. The stakeholders are Chesapeake Integrated Behavioral Healthcare, Chesapeake Court Services Unit, Chesapeake Department of Human Services, and Chesapeake Public Schools School Social Worker (if the IEP states private day education). The Child and Adolescent Case Manager will complete the program assessments and discuss the possible services and FAPT process with the legal guardian. If the legal guardian agrees with moving forward with FAPT, the case manager will complete the FAPT application and obtain the additional documentation requested (IEP, 504 plans, discharge reports from acute and past residential stays, and other treatment documentation). The case manager will also complete the CANS assessment (Child and Adolescent Needs and Strengths) based on the information provided by the legal guardian, the youth and treatment providers.

The guardian is required to provide copies of paystubs and other documentation to reflect the household income. The guardian has to complete the parental contribution form, as **there is a co-pay for FAPT services**.

Once the case manager has all the required documentation and the legal guardian and the case manager's supervisor sign the application, the case manager will submit the packet to the FAPT Coordinator.

The FAPT Coordinator technically has 30 days to review the packet and schedule a meeting. FAPT does not have emergency meetings. **FAPT meetings are only held on Wednesdays** at Chesapeake Department of Human Services, 100 Outlaw Street, Chesapeake, Virginia 23320. **Currently, due to COVID19 the meetings are via telehealth only (phone or video). Legal guardians are required to participate in all FAPT meetings.** If the legal guardian cannot attend or does not show for the meeting, the meeting cannot be held and will be rescheduled. Missing meetings could jeopardize funding for services.

The case manager cannot guarantee that FAPT will approve the requested services. If FAPT approves services, the FAPT Coordinator will present the FAPT recommended services before the Community Policy and Management Team (CPMT) for final approval. CPMT meets on the third Friday of the month. There are no emergency CPMT meetings. Legal guardians and case managers do NOT attend CPMT meetings, except on some occasions with prior approval the legal guardian has spoken before the CPMT prior to the team discussing the request.

The FAPT Coordinator will inform the case manager if CPMT approved the services. The case manager will coordinate services. Prior to the end of each FAPT meeting, the FAPT will provide the date and time of the next meeting. **FAPT meetings generally take place every 1-3 months, depending on the services and the needs of the youth.**

List of Community Based Services (not all-inclusive)

Intensive In Home Services (IIH): Intensive in-home services are therapeutic interventions provided to youth in their home to help the family improve functioning, prevent an out of home placement, and help the youth address emotional, behavioral and mental illness. The expectation is legal guardians will participate in the services with the youth. The in-home counselor typically provides up to 10 hours per week of services in the home (hours are pre-determined through authorization by the insurance or by FAPT).

Therapeutic Mentor: Therapeutic Mentor provides one to one support to youth to help the youth improve social skills, interpersonal relationships, self-esteem, community involvement and development of natural supports (non-paid, non-family members who will support and nurture the positive growth and development of the youth). Therapeutic Mentors may take the youth out into the community to practice social skills and develop connections. Therapeutic Mentor services are designed to be short-term (no more than 6 months). Insurance does not cover Therapeutic Mentor services. A case manager would need to assist the family in seeking FAPT funding for Therapeutic Mentor services.

Parent Coach: Parent Coach service focuses on providing education and support to the guardians to help them gain a better understanding of the youth's needs and to develop new ways to support the youth with managing mental and behavioral health needs. The Parent Coach will work with guardians on developing safety plans, behavioral modification plans, improving communication and conflict resolution skills with the youth. A recommendation of Parent Coach Service is in no way meant to insult a guardian or suggest that the guardian is not a good parent. It is a service to support the guardians in learning how best to support their child mental health needs and/or challenging behaviors. This service requires FAPT funding.

Virtual Residential: Virtual Residential Service is a therapeutic service that incorporates intensive in-home services, therapeutic mentor and parent coach services at an increase of hours per month than typically offered as individual services. The purpose of Virtual Residential Service is to support youth who are at risk of an out of home placement who need more intense supports to maintain at home and in the community. Virtual Residential Service is NOT a 24-

hour service. The assigned counselors will work with the family and youth to develop a schedule that best meets the youth and family's needs. This service requires FAPT funding.

High Fidelity Wraparound (HFW): HFW is a team-based, collaborative process for developing and implementing individualized care plans for youth with behavioral health challenges and their families. HFW involves the Intensive Care Coordinator (ICC) working with the youth and family to develop goals the family wants to work on based on the family's self-assessment and incorporating natural supports to help the family achieve their goals. The ICC typically schedules the HFW family meetings monthly at a location of the family's choice. The goal of HFW is to help the family learn to manage challenges and become more self-sufficient. In addition to the Intensive Care Coordinator (ICC), HFW service may offer a Family Support Partner (FSP) and a Youth Support Partner (YSP). Both support partners have lived experience of either being a parent of a youth or youth who has been received mental health service, and/or involvement with foster care or the juvenile justice system. HFW requires FAPT funding.